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<b>POWER OF ATTORNEY OR REVOCATION OF POWER OF ATTORNEY WITH A NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS</b>	<b>Application Number</b>		6,125,447 / 90/011,491	
	<b>Filing Date</b>		Issue Date: September 26, 2000	
	<b>First Named Inventor</b>		Li GONG	
	<b>Title</b>	PROTECTION DOMAINS TO PROVIDE SECURITY IN A COMPUTER SYSTEM		
	<b>Art Unit</b>		Not Yet Assigned	
	<b>Examiner Name</b>		Not Yet Assigned	
<b>Attorney Docket No.</b>		154892800300		
I hereby revoke all previous powers of attorney given in the above-identified application.				
<input type="checkbox"/> A Power of Attorney is submitted herewith. <b>OR</b> <input checked="" type="checkbox"/> I hereby appoint Practitioner(s) associated with the following Customer Number as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith: <div style="float: right; border: 1px solid black; padding: 5px; margin-top: 10px;">25226</div>				
<input type="checkbox"/> I hereby appoint Practitioner(s) named below as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith:				
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Please recognize or change the correspondence address for the above-identified application to:				
<input checked="" type="checkbox"/> The address associated with the above-mentioned Customer Number: <b>OR</b> <input type="checkbox"/> The address associated with Customer Number: <div style="float: right; border: 1px solid black; width: 200px; height: 20px; margin-top: 10px;"></div>				
<input type="checkbox"/> Firm or Individual Name				
<b>Address</b>				
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<b>Country</b>		<b>Telephone</b>	<b>Email</b>	
I am the:				
<input type="checkbox"/> Applicant/Inventor. <b>OR</b> <input checked="" type="checkbox"/> Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) (Form PTO/SB/96) submitted herewith or filed on _____				
<b>SIGNATURE of Applicant or Assignee of Record</b>				
<b>Signature</b>		<b>Date</b>		
Name		Telephone		
Title and Company				
George P. Simion		03/11/11 650-506-9997		
Sr. Patent Counsel, Oracle America, Inc.				
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.				
<input checked="" type="checkbox"/> *Total of <u>1</u> forms are submitted.				